PTCEBRAG (13-04)
Approved for use through 703 92005, OMB 0551-0032
U.S. Peters and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Peperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless § displays a weld OMB control respond. PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-876 APPLICATION AS FILED - PART I OTHER THAN (Cohtra 1) SMALL ENTITY OR (Columni 2) SMALL ENTITY FOR **KLAIBER FILED** HUMBER EXTRA RATE (1) FEE (S) RATE(S) FEE (1) BASIC FEE [37 CFR 1.10(a), (b), or (c) SEARCH FEE (37 OFRAL 1870, (7), or (98)) EXAMINATION FEE (27 OFR L 18(s), (9), or (st) TOTAL CLASMS (37 CFR 1.18(7) ratova 20 -**OR** PROEPENDENT CLAIMS (37 CFR 1.1679) ė If the specification and drawings exceed 100 APPLICATION SIZE sheets of paper, the application size fee due in \$250 (\$125 for small entity) for each FEE (37 CFR 1.16(s)) additional 50 sheets or tracting 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(a). MULTIPLE DEPENDENT CLAIM PRESENT (37 OFR 1.15(0)) . I the difference in column 1 is less than zero, enter 'V' in column 2 TOTAL TOTAL APPLICATION AS AMENDED - PART II OTHER THAN OR (Column 1) (Column 2) (Cotumn 3) SMALL ENTITY CLABLE HORDERT - NUMBER PREVIOUSLY PRESENT EXTRA REMAINING ADDI-TIONAL PEE (3) RATE (1) RATE (3) ADO: AFTER FEE (8) WENDMENT Total profit Lt OR 3 **OR** Application Size Fee (37 CFR 1.18(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAHI (0.7 CFR 1.140) OR TOTAL ADD'L FEE TOTAL OR ADD'L FEE <u>9.</u>28.**06** (Column 1) (Cotumen 2) (Catums 3) CLAMS HIGHEST REMAINING PRESENT MARKER RATE (1) ADDI-TIONAL ACCOL EVIOUSLY AFTER EXTRA PAID FOR FEE (1) ú FEE (B) to call riels 26 ENDM QЯ Independent profes Lieps 41 OR Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (\$7 OFR LISO) OR TOTAL ADD'L FEE TOTAL ADO'L FEE OR * If the entry to column 1 is least than the crity in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "2".

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "2".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by .37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confident stiff by a powered by .35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any columnary on the amount of time you require to complete 51s form and/or suggestions for reducing this burden, should be sent to the Crief Information Officer, U.S. Patient and Transpark Critice, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

ACORESS. SEND TO: Commissioner for Patients; P.O. Box 1450, Alexandria, VA 22313-1450.

If you need excitizace in completing the form, cell 1-800-PTO-9199 and select updan 2